

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

SPENST HANSEN
KEYSTONE SURVEYS INC
44 W BROADWAY STE 704S
SALT LAKE CITY UT 84101

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

9/26/00

C. Signature

X

☐ Agent

☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Article Number (Copy from service label)

Z 230 748 243

JB

DOGM

S/023/041

9/20/00

Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

RECEIVED

SEP 27 2000

DIVISION OF
OIL GAS AND MINING

**DIVISION
OF
OIL GAS & MINING**

1594 W NORTH TEMPLE STE 1210

BOX 145801

SALT LAKE CITY UT 84114-5801



Z 230 748 243

JB

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to SPENST HANSEN

KEYSTONE SURVEYS INC

Street & Number

44 W BROADWAY STE 704S

Post Office, State, & ZIP Code

SLC UT 84101

Postage

\$

Certified Fee

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to
Whom & Date DeliveredReturn Receipt Showing to Whom,
Date, & Addressee's Address**TOTAL** Postage & Fees

\$

Postmark or Date

DIVISION OF
OIL, GAS AND MINING

DOGM

S/023/041

9/20/00

Stick postage stamps to article to cover **First-Class postage**, certified mail fee, and charges for any selected optional services (*See front*).

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached, and present the article at a post office service window or hand it to your rural carrier (*no extra charge*).

2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach, and retain the receipt, and mail the article.

3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.

4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.

5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.

6. Save this receipt and present it if you make an inquiry.

102595-97-B-0145